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TRANSMITTAL  
FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

20

Application Number	10/636045
Filing Date	8/7/2005
First Named Inventor	Brown
Art Unit	2634
Examiner Name	Zheng
Attorney Docket Number	RAD344

ENCLOSURES (Check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input checked="" type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):	Remarks
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Menlo Patent Agency LLC		
Signature			
Printed name	David R. Gildea		
Date	2/24/2005	Reg. No.	38465

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

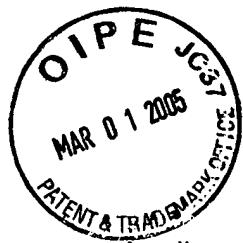
Signature	
Typed or printed name	David R. Gildea
Date	2/24/2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Reply under 37 CFR 1.116  
Expedited Procedure  
Technology Center 2634

Applicant: Brown

Title: Automatic Burst Mode I/Q Gain and Phase Calibration using Packet-Based Fixed Correction Coefficients

U.S. Serial No. 10/636045

Date Filed: 8/7/2003

Group Art Unit: 2634

Examiner: Zheng

Docket No. RAD344

FEE TRANSMITTAL LETTER

	CURRENT CLAIMS	STANDARD CLAIMS	PREVIOUSLY PAID FOR EXCESS CLAIMS	EXCESS CLAIMS REQUIRING PAYMENT	RATE	FEES
1201 Independent claims	8	3	1	4	\$200	\$800
1202 Claims in excess of 20	20	20	0	0	\$50	\$0
1814 Statutory disclaimer						\$130
Payment due						\$930

X This correspondence includes a check for \$930.

X The applicant believes that the above identified check is full payment for this correspondence. However, should the Patent Office determine that this payment is deficient or in excess of the payment due for this correspondence, the Commissioner for Patents is authorized to deduct the amount of the deficiency or credit the amount of the

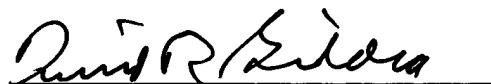
excess in the deposit account numbered 071248. The name and address of the depositor are:

David Gildea  
Menlo Patent Agency LLC  
435 Hermosa Way  
Menlo Park, California 94025

A duplicate copy of this fee transmittal letter is enclosed.

X The applicant believes that no extension of time period is required for this response. However, the applicant makes a conditional petition for extension of time to provide for the possibility that the applicant has inadvertently overlooked the need for such petition for extension of time.

Date: 2/24/2005



David R. Gildea

Reg. No. 38,465